

## STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (U.S. CDC) established an office in Ethiopia in 2001. CDC Ethiopia works closely with the Government of Ethiopia through the Federal Ministry of Health (FMOH) and other partners to save lives by strengthening HIV and Tuberculosis prevention and control efforts through support from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

**Reaching and Sustaining HIV Epidemic Control:** CDC Ethiopia is a key partner supporting HIV prevention, HIV case finding, and provision of quality clinical services including adherence and retention of patients in care. CDC Ethiopia is the lead technical partner working with FMOH to establish a national HIV case-based surveillance (CBS) system, an essential tool for monitoring and sustaining epidemic control, reinforcing laboratory and health information systems and data for decision-making. This includes the introduction of recent infection testing for all newly identified cases and response activities for any identified clusters of new HIV infections.

**Building Local Partner Capacity:** CDC Ethiopia works closely with FMOH counterparts to implement a sustainable program with shared responsibility. In Fiscal Year (FY) 2018, more than 70% of CDC Ethiopia funding went to local partnerships, including the Ethiopia Public Health Institute (EPHI), the Federal HIV/AIDS Prevention and Control Office, Regional Health Bureaus, and local networks of people living with HIV (PLHIV).

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**Ethiopia Population-based HIV Impact Assessment:** CDC collaborated with FMOH, EPHI, and ICAP-Columbia University to implement a survey in urban Ethiopia to evaluate the national HIV response to date. Results indicate Ethiopia has made considerable progress towards reaching HIV epidemic control with 70.1% prevalence of viral load suppression among HIV-positive people aged 15-64 years in urban areas.

**HIV Treatment:** CDC Ethiopia provided technical assistance to strengthen clinical services for more than 455,300 PLHIV engaged in care at the end of FY 2018. CDC Ethiopia supports patient-centered care including the provision of rapid and same-day antiretroviral treatment (ART) initiation, appointment spacing options, and adolescent friendly services for improved linkage to services and clinical outcomes.

**Prevention of Mother-to-Child Transmission:** During FY 2018, over 1,036,209 pregnant women learned their HIV status and 14,809 HIV-positive pregnant or breastfeeding women received ART to prevent HIV transmission to their children.

**Key Population (KP) Friendly Services:** CDC Ethiopia provides technical assistance to improve access to quality HIV prevention and treatment services for female sex workers (FSW). In FY 2018, over 83,000 FSW were reached with a package of HIV prevention services including pre-exposure prophylaxis.

**Voluntary Medical Male Circumcision:** In FY 2018, CDC Ethiopia supported 20,257 voluntary medical male circumcisions to avert new female to male heterosexual HIV infections.

**TB/HIV:** With the goal of significantly reducing TB-associated morbidity and mortality among PLHIV, CDC Ethiopia implemented an active tracking system to accelerate uptake and completion of TB Preventive Treatment (TPT) among ART clients. In FY 2018, at CDC Ethiopia supported clinics, HIV testing among TB patients was 98%, ART coverage among HIV-positive clients was 96%, and almost 35,000 PLHIV newly enrolled on ART received TPT.

**Strengthening Laboratory Systems:** CDC Ethiopia supports the scale-up of HIV viral load testing and has improved coverage from 5% of eligible clients in FY 2016 to 62% in FY 2018. CDC Ethiopia strengthens data exchange and use between facilities and referral labs, improves demand generation with both patients and providers, reinforces the specimen transportation system, and supports quality assurance methodologies.

## Key Country Leadership

Prime Minister:  
Abiy Ahmed

Minister of Health:  
Amir Aman

U.S. Ambassador:  
Michael Raynor

CDC/DGHT Director:  
Christine Ross

## Country Quick Facts ([worldbank.org/en/where-we-work](http://worldbank.org/en/where-we-work))

Per Capita GNI:  
\$790 (2018)

Population (million):  
109.22 (2018)

Under 5 Mortality:  
59/1,000 live births (2017)

Life Expectancy:  
66 years (2017)

## Global HIV/AIDS Epidemic ([aidsinfo.unaids.org](http://aidsinfo.unaids.org))

Estimated HIV Prevalence  
(Ages 15-49): 1.0 (2018)

Estimated AIDS Deaths  
(Age ≥15): 9,200 (2018)

Estimated Orphans Due to  
AIDS: 290,000 (2018)

Reported Number  
Receiving Antiretroviral  
Therapy (ART) (Age ≥15):  
428,472 (2018)

## Global Tuberculosis (TB) Epidemic ([who.int/tb/country/data/profiles/en](http://who.int/tb/country/data/profiles/en))

Estimated TB Incidence:  
164/100,000 population  
(2017)

TB patients with known HIV  
status who are HIV positive:  
7% (2017)

TB Treatment Success Rate:  
90% (2016)

TB Mortality:  
24/100,000 population  
(2017)

**DGHT Country Staff: 73.6**

Locally Employed Staff: 64.6  
Direct Hires: 9  
Fellows & Contactors: 0

Our success is built on the backbone of science and strong partnerships.

July 2019 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding

